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Journal Element

- ▶ Journal front matter
 - Front page
 - Verso page
 - Editorial board
 - Spine
 - Table of contents
- ▶ Article
 - Title page
 - Main text
 - Article back matter
- ▶ Journal back matter

Front page

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- ▶ pISSN
- ▶ eISSN
- ▶ Official title
- ▶ Design
- ▶ Homepage URL
- ▶ Publisher



Verso page

Journal of Gynecologic Oncology

JGO

Aims and Scope

The Journal of Gynecologic Oncology (JGO) is an official publication of the Asian Society of Gynecologic Oncology and the Korean Society of Gynecologic Oncology.

The JGO's aim is to publish the highest quality manuscripts dedicated to the advancement of care of the patients with gynecologic cancer. It is an international peer-reviewed periodical journal that is published quarterly (March, June, September, December). The journal publishes editorials, original articles, reviews, case reports, and correspondence.

Research areas covered by this journal include: epidemiology, prevention, diagnosis, treatment strategies including surgery, chemotherapy, radiotherapy, or combined therapy, clinical trials, quality of life issues, and basic research genetics, immunology, 'omics', as well as research from any of the related disciplines.

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Korean Journal of Ophthalmology

About the Journal

The Korean Journal of Ophthalmology (Korean J Ophthalmol) is the official journal of the Korean Ophthalmological Society published in English. The first volume was published in 1987 by the Department of Ophthalmology, Seoul National University. Since 1998, it has been published under the supervision of the Korean Ophthalmological Society, and since 2001 it has been an official publication of the Korean Ophthalmological Society. In 2005, the journal transitioned from biannual issuance to quarterly publication. In 2007, the journal began to provide free full text access through PubMed LinkOut. The journal began bimonthly publication in 2010. All or part of the content is indexed/tracked/covered by Medline/PubMed, PubMed Central, SCOPUS, Google Scholar, CrossRef, KoreaMed, KoreaMed Synapse and KoMCI. The full text is available from PubMed Central, KoreaMed Synapse and the journal's own homepage, <http://www.ekjo.org/>. This journal was supported by the Korean Federation of Science and Technology Societies Grant funded by the Korean Government (MEST).

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The journal is distributed to the members of the Korean Ophthalmological Society, medical libraries, and many other institutions worldwide to promote the development of ophthalmology and academic exchanges among the Korean Ophthalmological Society members as well as international colleagues.

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Aim and Scope

Journal of Periodontal & Implant Science (JPIS) is a peer reviewed and open-access journal providing up-to-date information relevant to professionalism of periodontology and dental implantology. JPIS publishes research articles, reviews and case reports related to basic or clinical periodontal science. Hence, JPIS welcomes practical clinical reports, evidence-based original articles and fundamental reviews covering the broad range of interests within the field of periodontology from anybody in the world.

Background

JPIS was renamed from the Journal of the Korean Academy of Periodontology, which was first published in 1971. It was initially published once a year but became a biannual journal in 1988, a tri-annual journal in 1993, a quarterly journal in 1996, and then a bimonthly journal in 2010. This journal is supported by the Korea Research Foundation Grant funded by the Korea Government (MEST, Basic Research Promotion Fund) and published in part with financial support from the Korean Federation of Science and Technology Societies. All or part of JPIS is indexed/tracked/covered by PubMed, PubMed Central, KoreaMed, Synapse, KoMCI, CrossRef and Google Scholar.

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- ▶ Year
- ▶ Month
- ▶ Volume
- ▶ Issue
- ▶ Page
- ▶ Publisher



Table of Contents

- ▶ pISSN, eISSN
- ▶ Journal title
- ▶ Subheading for publication type (editorial, opinion, review, original article, brief note, case report, teaching material, book review, letter to editor, errata/revision, announcement)
- ▶ Paper title
- ▶ Page
- ▶ Copyright statement

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pISSN: 1015-6402 • eISSN: 1015-6402

CONTENTS

REVIEW ARTICLES	7	The Effect of ADSCs(Adipose issueDerived Stem Cells) and Fibroblasts on Wound Healing with Skin Substitute <i>MK Cho, WJ Song, CH Kim</i>
------------------------	---	--

ORIGINAL ARTICLES	7	The Effect of ADSCs(Adipose issueDerived Stem Cells) and Fibroblasts on Wound Healing with Skin Substitute <i>MK Cho, WJ Song, CH Kim</i>
	15	Reconstruction of the Total Soft Palatal Defect using the Folded Radial Forearm Free Flap and Palmaris Longus <i>Tendon Sling, SM Chung</i>
	21	Usefulness of gold thread implantation for periorbital wrinkles(Crow's feet) <i>ST Ryoo, JK Pyon, SY Lim, GH Mun, SI Bang, KS Oh</i>
	25	Retiform Hemangioendothelioma on the Finger <i>WH Tark, WJ Lee, IS Yun, DK Rah</i>
	29	Vein wrapping technique for nerve reconstruction in patients with thyroid cancer invading the recurrent laryngeal nerve <i>MY Lee, TJ Lee</i>
	35	Management of local recurrence after immediate TRAM(Transverse Rectus Abdominis Myocutaneous flap) breast reconstruction <i>HM Kim, JH Kim, JH Hwang, KS Kim, SY Lee</i>
	41	Care effect of moist alginate film dressing on wound healing in rat <i>JY Lee, HK Kim, WS Kim, BY Park, TH Bae, JW Choe</i>
	47	Efficacy of Dermal Matrix substitute(CGDermin™) on the full thickness skin defect reconstruction <i>JS Kwon, HJ Choi, CY Choi, JH Park, NK Park, S Kim</i>

CASE REPORTS	55	Xanthogranuloma in adolescence <i>HI Cho, H Chang</i>
	59	Improvement of upper extremity lymphedema after delayed breast reconstruction with extended latissimus dorsi myocutaneous flap <i>JC Jang, SH Jeong, SK Han, WK Kim</i>

IDEA & INNOVATION	55	Xanthogranuloma in adolescence <i>HI Cho, H Chang</i>
	59	Improvement of upper extremity lymphedema after delayed breast reconstruction with extended

Article Title Page

- ▶ Bibliographic information
- ▶ DOI
- ▶ Title/Authors/Affiliation
- ▶ Abstract/Keywords
- ▶ Date of received and accepted
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- ▶ eISSN
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Article Title Page

Review Article

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Computer Assisted Navigation in Knee Arthroplasty

Dae Kyung Bae, MD, Sang Jun Song, MD

Department of Orthopaedic Surgery, Kyung Hee University School of Medicine, Seoul, Korea

Computer assisted surgery (CAS) was used to improve the positioning of implants during total knee arthroplasty (TKA). Most studies have reported that computer assisted navigation reduced the outliers of alignment and component malpositioning. However, additional sophisticated studies are necessary to determine if the improvement of alignment will improve long-term clinical results and increase the survival rate of the implant. Knowledge of CAS-TKA technology and understanding the advantages and limitations of navigation are crucial to the successful application of the CAS technique in TKA. In this article, we review the components of navigation, classification of the system, surgical method, potential error, clinical results, advantages, and disadvantages.

Keywords: *Knee, Arthroplasty, Computer assisted navigation*

Article Title Page

August 1997.⁷

Currently, there are several navigation tools including OrthoPilot (Aesculap AG & Co, Tuttlingen, Germany), Vector Vision (BrainLab, Heimstetten, Germany), and Knee Track Module (Stryker Howmedica Osteonics, Allendale, NJ, USA). A recent survey showed that 33.1% of surgeons use navigation for at least 50% of their TKAs and that 25% of surgeons use navigation for 75% or more of their TKAs.³⁾

Limb alignment and soft tissue balancing are impor-

occur in at least 10% of TKAs, including those performed by experienced surgeons.⁶⁾

Computer assisted navigation was developed to improve the position of implants during TKA. Computer assistance achieves more accurate postoperative alignment through more precise and reproducible bony resection and ligament balancing.^{7,8)} However, no long-term result studies or clinical trials provide evidence that navigation lowers the revision rate. Here, we review computed assisted surgery (CAS) technology, its advantages, disadvantages, applications, and the limitations of navigation.

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DEFINITION

The acronym for computer assisted orthopedic surgery is CAOS. Computer assisted systems are divided into three categories: active robotic system, semi-active robotic sys-

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Main Text

- ▶ Introduction
- ▶ Materials and methods
- ▶ Results
- ▶ Discussion
- ▶ Tables
- ▶ Figures

Article Back Matters

- ▶ Notes
- ▶ Conflict of interest
- ▶ Acknowledgments
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- ▶ Appendixes

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Special Article

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Table of Contents > Abs + Ref

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Spot Urine Albumin to Creatinine Ratio and Serum Cystatin C are Effective for Detection of Diabetic Nephropathy in Childhood Diabetic Patients

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Abstract

Spot urinary albumin to creatinine ratio (ACR) measurement has been suggested as a surrogate to 24-hr urine collection for the assessment of microalbuminuria, and cystatin C (cysC) is known as an advantageous marker for renal function. The aim of this study was to evaluate the clinical values of spot urinary ACR and serum cysC for the assessment of diabetic nephropathy instead of 24-hr urine microalbumin in children and adolescents with diabetes. A total of 113 children and adolescents (age 12-19 yr, M:F = 47:66) with type 1 or 2 diabetes were enrolled. We evaluated the validity of spot urine ACR and serum cysC, and then compared them to 24-hr urine microalbumin and creatinine.



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